Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Shamp (Received) 524000000 Jud

	Permit #:	14-0416
"melanamacandidamasopa	Date:	11-3-14
	Amount Paid:	

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		, ( × ×				with Loft	***		
		×		and the second s	hack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence		
		×			ure on property)	Principal Structure (first structure on property)	☐ Principal St		
Square Footage	sions	Dimensions		re .	Proposed Structure			Jse	Proposed Use
Transmitter of the Control of the Co	Height:		Width:		Length:			truction:	Proposed Construction:
	Height:		Width:		Length:	s relevant to it)	Existing Structure: (if permit being applied for is relevant to it)	ı <b>re</b> : (if perm	Existing Structu
									Anna Anna Anna Anna Anna Anna Anna Anna
		oilet	- 1			Foundation	Ž į	Property	
	-	Portable (w/service contract)		None		- 1		Runa	
	min 200 gallor	Privy (Pit) or Vaulted (min 200 gallon)		- 1			rtipa blda)	Belocate (av	144444
	ָם. 		Sanitary (Fy	- 1		- 1	I CEI GLIOII	Addit	ተሉ
∃ Well	rD	tary Specify Type:	- 1	- 1	□ Year Round		+	) Add:	
□ City		City	☐ Municipal/Citv	1	Seasonal	1-Story	New Construction	□ Now t	material
Water	tem P	Sewer/Sanitary System Is on the property?	Sew Is	of bedrooms	Use	# of Stories and/or basement	Project		or completion * include donated time &
		What Type of		#					Value at Time
				-					X Non-Shoreland
□ Yes XNo	□ Yes		Distance Structure is from Shoreline :	Distance Stru	Pond or Flowage If yescontinue —	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	perty/Land within 1	□ Is Pro	□ Snoreland -
Are Wetlands Present?	Is Property in Floodplain Zone?		Distance Structure is from Shoreline :	Distance Stru	itream (incl. Intermittent) If yescontinue	liver, S	ls Property/Land within 300 feet of F Creek or Landward side of Floodplain?	☐ Is Pro	
B	Acreage	Lot Size		River	Town of:	N, Range 8 W	, Township 47 N, I	29, TON	Section
		Subdivision:	Block(s) No.	Lot(s) No.	A Vol & Page	t Lot(s) CSM	1/4 Gov't Lot	NG 1	S 1/4,
Ty Ownership)	nent: (i.e. Property  Page(s)	Recorded Document: (i.e. Property Ownership) Volume 1125 Page(s) 777	47-08-29-104-00-1000	39-104	PIN: (23 digits) 04-034-コーリア-08	(Use Tax Statement) PIN: (2	Legal Description: (Use Tax	Legal De	PROJECT LOCATION
No	Attached  K Yes						0	0	Ö
Written Authorization	Written Au	state/Zip):	Agent Mailing Address (include City/State/Zip):	gent Mailing Add	Agent Phone: A			(Person Signing	Authorized Agent: (Per
hone:	Plumber Phone:			Plumber:		Coutra Coutra	3,+1,5	_	4.
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コス	Cell Phone: 7(5	1	EX (NOT )	(		S/MC	100	SHIP TO VE	Address of Proper
	Jejephones	5×650	City/state/4bi	<u> </u>	Walling Address:	U sais	2	+	Owner's Name:
HER	B.O.A. DOTHER		×		□ PRIVY □	JSE SANITARY	D—▶ ☐ LAND USE	REQUESTED	TYPE OF PERMIT REQUESTED-
					Mylield Co. Zoni	Checks are made payable to: Bayfield County Zoning Department.  DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS	ble to: Bayfiel	Checks are made paya
		Refund:	Refi		MU 7 C C C	paid.	issued until all fees are	ermits will be i	INSTRUCTIONS: No pe
					AID 0 00011	a commence de la comm			

Droposad IIsa	<b>\</b>	Proposed Structure	Dimensions	ions	Square
			•	•	- Aprilo
		Principal Structure (first structure on property)	×	_	
		Residence (i.e. cabin, hunting shack, etc.)	( ×	)	
		with Loft	×	_	
Residential Use		with a Porch	×	_	
		with (2 <sup>nd</sup> ) Porch	×	)	
-		with a Deck	( X	_	
		with (2 <sup>nd</sup> ) Deck	×	_	
X Commercial Use		with Attached Garage	×	)	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	( x	)	
		Mobile Home (manufactured date)	×	_	
		Addition/Alteration (specify)	×	_	
☐ Municipal Use		Accessory Building (specify)	×	)	
		Accessory Building Addition/Alteration (specify)	×	)	
Rec'd for Issuance	Ф <u> </u>		,		, and a second
		Special Use: (explain)	( ×	-	
NOV 03 2014 8	Жĺ	Conditional Use: (explain) Re-Mew Non-wetallic /VIMC	×	}	
		Other: (explain)	×	_	
Secretarial Staff		FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES	IES		-

(we) declare that this application (including any accompanying information) has been examined by one (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. gn or letter(s) of authorization must accompany this application) Date

Date 0 ত 100

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Authorized Agent:

88

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Address to send permit\_

writing on behalf of the owner(s) a letter of authorization must according to the Maternals Clo Condy

Owner(s): \_\_\_\_\_\_

Attach
Copy of Tax Statem
If you recently purchased the property send your R

Anderson pany this application)

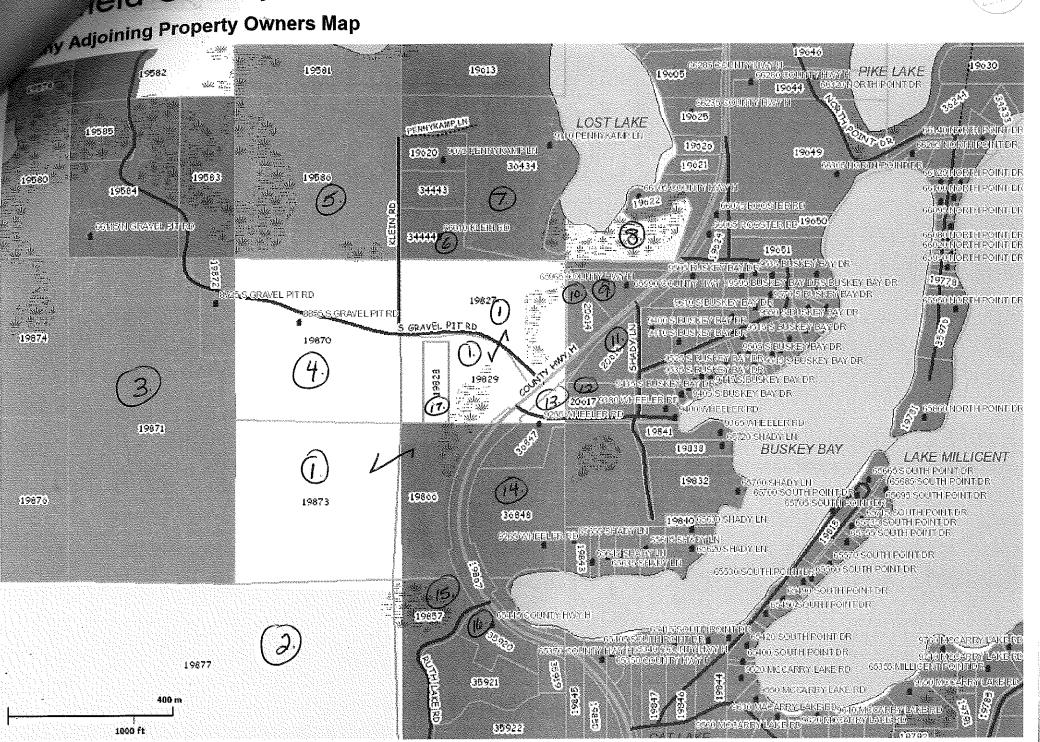
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Hwy 8, Amery, WI 54001

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## reld County, WI





Baysield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

BAYFIELD COUNTRY, WILL OF SMILE COUNTRY, WILL OF SMILE COUNTRY, WILL OF SMILE COUNTRY OF SM

Bayfield Co. Zoning Dept.

EMERCIDAte: Permit #: Refund: nount Paid: \$75.79 10-16

No permits will be issued until all fees are paid.

Secretarial Stall FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES   [(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and am (are) responsible for the detail and accuracy of alliabanation ((we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a per may be a result of Bayfield County relying gorfis information) ((we) am (are) providing into with this application. I (we) consent to county officials charged with administering above described property a famy passaged the provided of the providing into with this application.  Owner(s):			Rec'd for Issuance		☐ Municipal Use			☐ Commercial Use		•	🔀 Residential Use			Proposed Use	Proposed Construction:	Exicting Structure: (if permit being applied for is relevant to it)			3	5 000 I		material ×	Value at Time of Completion * include donated time &	X Non-Shoreland	Shoreland		Section 8	1/4,	PROJECT LOCATION	tuthorized Agent: (Person Signing Application on behalf of Owner(s))	Sect.	SIAO U	wher's Name:	NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.  VDF OF PERMIT REQUESTED ->   X LAND USE   SANITARY   1
stall plication (including plication (including he detail and accur de County relying garny pasonable any pasonable de la county relying garny pasonable de la county pasonable d		T	T°1		<u> </u>			se			ю			<u> </u>	on:	if permit heing		Property	Relocate (existing bldg)	Conversion	☐ Addition/Alteration	New Construction	Project		Is Property/L	is Property/L: reek or Landw	_ , Township _	1/4	Legal Description:	1 Signing Application	L. Andrea	3		ESTED - VI
FAILURE TO OBTI	Other: (explain)	Special Use: (explain)		Accessory Building	Addition/Alte	Mobile Home	Bunkhouse w/	W	W	W	W	Residence (i.e.	Principal Struc	the parties		applied for is re						5×			and within 1000	☐ Is Property/Land within 300 feet of R Creek or Landward side of Floodplain?	47 N, Range	Gov't Lot	,	on on behalf of Own	List of the Control o	Y 2	1 / "	ERMITS HAVE BEEN
DBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT (in it is providing and that it will be relied upon by Bayfield County in determining whether if (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether in (we) am (are) providing In or with this application. I (we) consent to county officials charged with the charged with the charged with t	) explain	explain)		Accessory Building Addition/Alteration	13	Mobile Home (manufactured date)	Bunkhouse w/ (□ sanitary, or □	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Principal Structure (first structure on property)			levant to it)		Foundation	Basement No Pasamont	2-Story	1-Story + Loft	1-Story	# of Stories and/or basement		Is Property/Land within 1000 feet of Lake, Pond or Flowage	iver, S	© 8	Lot(s) CS				City/	NOS	ISSUED TO APPLICA
ARTING CONSTRUINAMINE (us) are fing and that it will be gill or with this application of letter(s) of automatical content of automatical	Addition with the second secon			1 711	00000	date)	☐ sleeping quarters,	arage		- the state of the		snack, etc.)	cture on prop	Proposed Structure	Length:	Length:					🛚 🗡 Year Round	☐ Seasonal	Use		Pond or Flowage If yescontinue	tream (ind. Intermite	Town of:	CSM Vol & Page	1		Contractor Phone:	-	Address:	ANT.
cTION WITHOUT A nd to the best of my leated upon by Bayfi cation. I (we) consen	1997			(specify)	**************************************		arters, <u>or</u> 🗆 cooking						erty)	ucture				T	X None	3	$\vdash$	_ 	# of bedrooms		Distance		on River		8		Plumper:	RIVER	Ifwy 2	□ CONDITIONAL USE
PERMIT WILL RES our) knowledge and led County in determ to county officials of the county		- Allendary				444	king & food prep facilities)								Width:	Width:	□ None		]  -		☐ (Nev	X Mun	3	-	Distance Structure is fro	Distance Structure is fro		13-16 13	12 10 10 10 10 10 10 10 10 10 10 10 10 10	Address (Hicha		VSIN.	To	
ULT IN PENALTIES belief it is true, corre inining whether to iss charged with admining the period of							o facilities) (										e e	Compost Toilet	Portable (w/service cont	xists) s	ļ	X Municipal/City	What Type Sewer/Sanitary Is on the pro		from Shoreline :	is from Shoreline :	Lot Size	<del> </del>	+	Recorded D	) Oit (6+5+6 /7in)	5484	RIVEN, WI.	SPECIAL USE
Stand complete. I (set and complete. I (set and complete county ording county or			×	×	28 × 40	×	×	×	×	×	×	×	×	Dimensions	Height:	Height:			contract)	Specify Type:	1 ~		What Type of er/Sanitary System on the property?		No X	Is P	0	sseys	129	d Documer			1845	□ 8.0
complete. I (we) acknowledge that I (we) ermit. I (we) further accept liability which county ordinances to have access to the		_ -			0: 11:20	_ _		)		_ -				Square Footage		sht:			0	200 gallon)	□ Well		Water			rty in Are Wetland Zone? Present?	Acreage	Add to	Page(s) 2	Attached  L Yes X No  1t: (i.e. Property Ownership)	Written Authorization	SA-SE	Telephone: 808 - 258	□ OTHER

Address to send permit 3/25 U.
MIKE —
NOEDS SPEURU USE

Authorized Agent:

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

If you recently purchas

Attach
Copy of Tax Statement
Sed the property send your Recorded Deed

Date

(8) Setbacks: (measured to the closest point)

Description       Measurement       Description       Measurement       Description       Measurement         Setback from the Centerline of Platted Road       1/3       Feet       Setback from the Lake (ordinary high-water mark)       1/4       Feet         Setback from the Established Right-of-Way       7/57       Feet       Setback from the River, Stream, Greek       1/4       Feet         Setback from the North Lot Line       1/6       Feet       Setback from the Bank or Bluff       1/4       Feet         Setback from the South Lot Line       1/4       Feet       Setback from Wetland       1/4       Feet         Setback from the West Lot Line       1/4       Feet       Setback from Wetland       1/4       Feet         Setback from the East Lot Line       1/4       Feet       Setback from Floodplain       1/4       Feet         Setback to Drain Field       1/4       Feet       Setback to Well       Setback to Well       1/4       Feet				Feet	<b>2</b>	Setback to <b>Privy</b> (Portable, Composting)
Measurement Description Measurement    108   Feet   Setback from the Lake (ordinary high-water mark)   104		4		Feet	700	Setback to <b>Drain Field</b>
Measurement Description Measurement    108   Feet   Setback from the Lake (ordinary high-water mark)   104	Feet	H S	Setback to Well	Feet	2	Setback to Septic Tank or Holding Tank
Measurement Description Measurement    108   Feet   Setback from the Lake (ordinary high-water mark)   104					•	
Measurement Description Measurement    108   Feet   Setback from the Lake (ordinary high-water mark)   104	Feet	M	Elevation of <b>Floodplain</b>	Feet	1X.	Setback from the East Lot Line
Measurement Description Measurement    108   Feet   Setback from the Lake (ordinary high-water mark)   Martin	N <sub>O</sub>	□ Yes	20% Slope Area on property	Feet	74,	Setback from the West Lot Line
Measurement Description Measurement  108 Feet Setback from the Lake (ordinary high-water mark)  157 Feet Setback from the River, Stream, Creek  Setback from the Bank or Bluff  16 Feet Setback from the Bank or Bluff	Feet	7	Setback from <b>Wetland</b>	Feet	クダ	Setback from the <b>South</b> Lot Line (1)5/H204 2
Measurement     Description     Measurement       103     Feet     Setback from the Lake (ordinary high-water mark)     N.H.       757     Feet     Setback from the River, Stream, Creek     N.H.       Setback from the Bank or Bluff     N.H.				Feet	Ne.	Setback from the <b>North</b> Lot Line
Measurement    Description   Measurement	Feet	24	Setback from the Bank or Bluff			
Measurement    Description   Measurement	Feet	VI	Setback from the River, Stream, Creek	Feet	ナックナ	Setback from the Established Right-of-Way
Measurement Description	Feet	E A		Feet	<i>10</i> %	Setback from the Centerline of Platted Road
Measurement Description					e.,	
	nent	Measuren	Description	Ħ	Measureme	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the bounder previously surveyed corner or marked by a licensed surveyor at the owner's expense. ndary line from which the setback must be measured must be visible from one previously surveyed corner to the

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE**: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial:			
Permit #: 14 - 0420 Pe	Permit Date: //-3-/4			
Is Parcel a Sub-Standard Lot	Mitigation Required (Notis)	□Yes Š\No Af □Yes Š\No Af	Affidavit Required	XX No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	Previously Granted by Variance (B.O.A.)	Variance (B.O.A.) Case #:		
Was Proposed Building Site Delineated 文Yes 口 No	Were Property Line	Were Property Lines Represented by Owner Was Property Surveyed	`M Yes Ìy Yes	□ □ No
Inspection Record: Slab- was powed.		2	Zoning District ( $oldsymbol{lpha}$ Lakes Classification ( $oldsymbol{ u}oldsymbol{\mathcal{H}}$	
Date of Inspection: ID-17-14 In	Inspected by: M. Futale		Date of Re-Inspection:	
Condition(s):Town, Committee or Board Conditions Attached?	Yes No (If No they need to be attack	hed.)		
May not be used for human Natitation	n Nobtalien.			
Signature of Inspector: IM Wella I funded			Date of Approval: 7-/	
Hold For Sanitary: Hold For TBA:	Hold For Affidavit:	Hold For Fees:		

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYHELD-COUNTY, WIS CONSIN

Bayfield Co. Zoning Dept.

Refund:

は区の Permit #:

or Sketch

(5)

w Location of mow / Indicate: Show: Show:

w Location of: Show Location of (' (6) Show any (\*): (7) Show any (\*):

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

	1/4,1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivisi	PROJECT Legal Description: (Use Tax Statement) PIN: (23 digits) PROJECT PIN: (23 digits) PIN: (23 digits) PROJECT PIN: (23 digits) PIN: (	Authorized Agent: (Person Signing Application on behalf of Owner(s))  Agent Phone: Agent Mailing Address (include City/State/Zip):		SITO 1)S HWY 2 CIV/State/Zip: WI 54847	Hwy a Fron River, WISH	TYPE OF PERMIT REQUESTED → ☐ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ※ SPECIAL USE Mailing Address: City/State/Zip:	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
Lot Size	Hessey's H	Recorded Document: (i	i			747	□ B.O./	
Acreage , 344	dition	Document: (i.e. Property Ownership)	Written Authorization Attached Pes XNo	Plumber Phone:		258-090	□ B.O.A. □ OTHER  Telephone: 9/19	

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000		<b>&gt;</b>		material	donated time &	*incliide	of Completion		Walne at Time		メ Non-Shoreland		□ olloreidin →	The section of the se			
	∠Conversion	☐ Addition/Alteration	☐ New Construction				Project						Is Property/Land within 1000 feet of Lake, Pond or Flowage	7	Creek or Landward side of Floodplain?	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)	
7	☐ 2-Story	☐ 1-Story + Loft 🔀 Year Round	X 1-Story		שונט/טו מפאבווובויי	and for basement	# of Stories					₩ ye	1000 feet of Lake, Ponc		Floodplain? If ye	300 feet of River, Strea	
		★ Year Round	☐ Seasonal			Cyn	<b>-</b>					If yescontinue	d or Flowage		If yescontinue>		
3	S	× 2	-		bedrooms	¢		41.					Distance Struc			Distance Struc	
Privy (Pit) or Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type:	(New) sanitary specify type:	x (viunicipai/city		is on the property:		Sewer/Sanitary System	What Type of	::			teet	Distance Structure is from Shoreline:		reet	Distance Structure is from Shoreline :	
Ulted (Min 200 Balloli)	city type:	Try Type:	· · · · · · · · · · · · · · · · · · ·		opertyr	· ·	ry System	pe or	4			7440	N !	∏ Yes	Floodplain Zone?	Is Property in A	
		□ VV CII	W/2	X City			Water					ì	X( °	□ Yes	Present?	Are Wetlands	

of Completion * include donated time &	Project	# of Stories and/or basement	Use	of bedrooms	Sewer/Sanitary System Is on the property?	Water
material		<	□ Spaconal	1	X Municipal/City	City
		> 1-story	Dedocida	۱ د	(New) Sanitary Specify Type:	⊤ Well
-	☐ Addition/Alteration	☐ 1-Story + Loft	★ Year Round	× 2	(New) Sanitary Specify Type:	) Vyni
	★ Conversion	2-Story		3	☐ Sanitary (Exists) Specify Type:	
1000	sting bldg)	☐ Basement			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	Run a Business on	□ No Basement		□ None	☐ Portable (w/service contract)	
	Property	☐ Foundation			Compost Toilet	
					□ None	
	1994	1				
T C+m-24	This country of horse houng applied for is relevant to it)	ris relevant to it)	Length:		Width: Height:	
Existing on detaile. (ii) be	: 0 : 0 : 0 : 0 : 0 : 0 : 0 : 0 : 0 : 0		Length:		Width: Height:	
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			Dimensions	Square
Proposed Use	<	Proposed Structure	Difficultions	Footage
		Principal Structure (first structure on property)	X	
	X I	Residence (i.e. cabin, hunting shack, etc.)	(64×32)	1712
	7	C	( × )	
X Recidential Use		with a Porch		
		in fand near	~ × _	
		WITH (2 ) FOIGH	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		with a Deck	×	
		with (2 <sup>nd</sup> ) Deck	×	1000
☐ Commercial Use		with Attached Garage	×	
		Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	×	
	_	Mobile Home (manufactured date)	( × )	
		Addition/Alteration (specify)	×	
Municipal Use		Accessory Building (specify)	×	
		Accessory Building Addition/Alteration (specify)	( ×	
	<b>]</b>	Special Use: (explain)	( ×	
		Conditional Use: (explain)	×	
	<b>-</b>	Other: (explain)	( X	

I (we) declare that this application (includings am (are) responsible for the detail and accura may be a result of Bayfield County relying or above described property and responsible to FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Lany accompanying information) has been examined by me (sus) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) areas of a National I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the time possible of inspection.

Authorized Agent:

Address to send permit

Same

above

Owner(s):
(If there are Multiple

(If you are signing on behalf of the own ner(s) a letter of authorization must accompany this applica

Deed All Owners must sign or letter(s) of authorization must accompany this application) Date

Date

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## County, WI adjoining Property Owners Map 20283 20284 BEISO COUNTY HOW A 20285 20740 J9003 20287 19133 19109 68405 COUNTY HWY AGBYOOGOUNDWHYOYAS 20282 SHOCKLUMEN ST 20281 20741 20279 1 19079 CALUMETST 5 5 8 8 HOUS HWY 2 8165 CALUMET 8045 CALUMET ST 20742 pasoso <mark>(</mark>ront st 20744 (8 19080 68360 FRÓNT ST 20270 20271 20274 20275 (9) 7990 US HWY 2 8300 US HWY 2 10 35675 8140 U.S. FW 20743 3029B 8120 US HV 8060 UŚ HWY 2 20272 (1) 20273 20278 13. US HWY 2 19186 7915 US HWY 2 6045 US HVYY 2 6165 US HYXX 8265 US HWY 2 ...8345.US.H%Y<sub>4</sub>2 \_8095 U\$ HWY 2 # 7925 US HWY 2 - 6825 COUNTY HAVE BO25 US HWYZ 8075 US HVA Ø. 20261 8285 US HWY 2 20259 20550 19134 66247 COUNTY HWY H geagicoluniyahwy h -6922 COUNTY HOW HEOTO E MILL ST 8000 E MILL ST (21) 20261 20259 7500 WMUL STAP 1104 8 20249 7000 WMLLSTAPT 107 7000 W MILL STAPT 108 8003 E MILL ST 7000 W MILL STAPT 109 800 19093 8035 E MILL ST 19150 E MILL ST STOO E MILL ST 20360 34051 34052 34034 8275 EMILLIST 19153 20554 20356 20355 20557 ะสะสาสสอปฏิรา RO40/ERANKENES I 7070 FRANKLINIST 19170 YOU HANKUNIST 19171 GHOOLEROLIDE 19149 20357

400 ft

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

BAYFIELD COUNTY, WINCONSIA Date Tamp (Received)

APPLICATION FOR PERMIT

NOV 03 2014

Permit #: Date: #017 88HO-h1

B100-1217

Bayfield Co. Zoning Dapt.

Refund:

ILUSSI Standard Column	Secretarial Staff Other: (explain) ( x )			Accessory Building Addition/Alteration (specify)	Accessory Building		☐ Mobile Home (manufactured date)	_	with a Deck	W Recidential Use with a Borch	Proposed Use Principal Structure (first structure on property)	Existing Structure: (if permit being applied for is relevant to it)  Length: Length:	☐ Run a Business on ☐ No Basement ☐ Property ☐ Foundation ☐ ☐	□ Relocate (existing bldg) □ Basement □	Addition/Alteration	material ☐ New Construction ☐ 1-Story ☐ Seasonal 🛣	Value at Time of Completion Project # of Stories * include and/or basement bed	□ Non-Shoreland	Shoreland → X Is Property/Land within 1000 feet of Lake, Pond or Flowage     If yes—continue → □	☐ Is Property/Land within 300 feet of River, Stream (Ind. Intermittent)  Creek or Landward side of Floodplain? If yes—continue —▶	Section 32, Township 47 N, Range 8 W Tron R	1/4,1/4 3 Lot(s) CSM Vol & Page	(Use Tax Statement) 04-04ケス・ソラーのターよ	Agent Phone:  Agent Phone:  Agent Phone:  Agent Phone:	Solinson Contractor Phone:	Ch	ins TRUSTEE 3330 Glen Cairne	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.  TYPE OF PERMIT REQUESTED—>   JAND USE   SANITARY   PRIVY   CONC
B.O.A.  S. FL  C. B.O.A.  S. FL  C. B.O.A.  A Management: (I)  P C.	and produce the second	The state of the s	and the state of t	0		***************************************	King & rood prep lacilities) (	-	The state of the s			Width:		□ <b>Privy (Pit)</b> or	(New) Sanitary	☐ Municipal/City	What T Sewer/Sanit Is on the p		is from Shorelin	is from Shorelin		Block(s) No. Subdivis	OS-0ES-SECE Volum	ing Address (Include City/State/Zip): Written Author G/EN CAN CAN CAN CAN Attached XYes I No				

Attach
Copy of Tax Statement V
recently purchased the property send your Recorded Deed

Address to send permit

Samo

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above

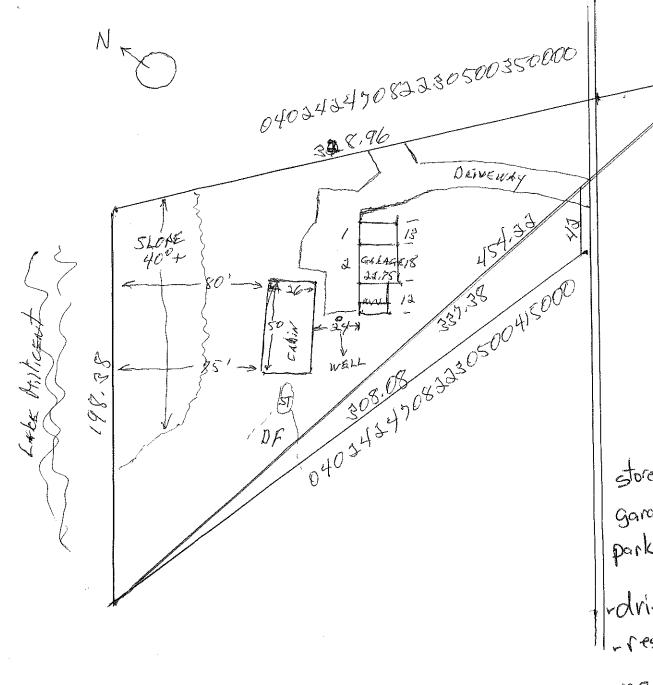
(M) A letter of authorization must accompany this application)

Authorized Agent: 🗡

(If you are signing on behalf of the

いってい Condition(s): Town, Committee or Board Conditions Attached? Date of Inspection: タフタイケ Hold For Sanitary: Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required serback, the boundary line from which the serback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be Setback from the South Lot Line Setback from the West Lot Line Setback from the Established Right-of-Way Signature of Inspector: Slab is consting. Mo Setback to Septic Tank or Holding Tank Setback from the Centerline of Platted Road Issuance Information (County Use Only) Setback to **Privy** (Portable, Setback from the North Lot Line Granted by Variance (B.O.A.)
□ Yes "从No" Permit Denied (Date): Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Was Parcel Legally Created Was Proposed Building Site Delineated Please complete (1) - (7) above (prior to continuing) O Privy (Portable, Composting)

acement or construction of a structure within ten (10) feet of the minimum results of the minimum results surveyed corner or marked by a licensed surveyor at the owner's expense. プ フ ブ (2) (3) (4) (5) (5) (7) below. Draw or Sketch your Property (regardless of what you are applying for) the East Lot Line Mitigation Show any (\*): Show any (\*): Show: **Show Location of:** Show / Indicate: Show Location of (\*): Setbacks: (measured to the closest point) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Privy (P), and Well (W) NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. Description Mulie Case #: Hold For TBA: ☐ Yes (Deed of Record)
☐ Yes (Fused/Contiguous Lot(s))
☐ Yes increase Proposed Construction
North (N) on Plot Plan
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
(\*) Wetlands; or (\*) Slopes over 20% □ N 8 Edave S Inspected by: Sanitary Number: Permit Date: Reason for Denial: Measurement ☐ Yes on completo 200 Hold For Affidavit: attachment Feet Feet Feet Feet Feet S S S X X Feet -(If No they need to be attached.) 247261 tuden Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.)
□ Yes Ø-No Setback from the Lake (ordinary high-water mark)
Setback from the River, Stream, Creek
Setback from the Bank or Bluff Setback to Well Setback from Wetland
20% Slope Area on property Were Property Lines Represented by Owner Somo S of Floodplain Changes in plans must be approved by the Planning & Zoning Dept. Hold For Fees: X LU and a # of bedrooms: XYes Yes Cabi Was Property Surveyed Description ick must be measured must be visible from Case #: Affidavit Required Affidavit Attached Lakes Classification Date of Re-Inspection: Zoning District XYes Sanitary Date: R Flowst Date of Approval: (S) Measurement WYes Pyres -18-95 No No Feet □ No □ 0 8 8 Feet Feet



PROPOSED CONSTRUCTION:

\* 1. Add SECOND GARAGE STALL

\*\* J. Add SECOND Flood ABOVE

\*\* J. Add SECOND Flood ABOVE

\*\* AND GARAGE STALLS

\*\* S/Ah A/READY IN X/ACE

- 13 TEET WIDE

- JJ. 75 FEET DEEP

\*\* NO plushed into, paimany need

is stolage, E/Ectrical

ALEADY IN PLACE

storeroom /2 x 12.5 = 150

garage 16 x 22.75 = 409.5

parking area 65 x 23 = 1,495

parking area 65 x 23 = 1,495

all the storeroom 10 x 110 = 1,110

residence 55 x 32 = 1,760

raddition 13' x 22.75 = 295. Ibelow 13' x 32' > 1,760

(1) Show (2) Show (3) Show (4) Show: